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CONFIRMATION NO. 7599

<b>SERIAL NUMBER</b> 10/517,187	<b>FILING or 371(c) DATE</b> 05/31/2005 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3752	<b>ATTORNEY DOCKET NO.</b> UDL20.001APC		
<b>APPLICANTS</b> Ian Robert Thomson, St Neots, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/GB03/02443 06/06/2003 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0213245.4 06/08/2002 UNITED KINGDOM 0220276.0 09/02/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> SMALL ENTITY **						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/DAVIS D HWU/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614 UNITED STATES						
<b>TITLE</b> Delivery system for a medicament or well-being enhancing composition						
<b>FILING FEE RECEIVED</b> 716	FEES: Fee has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		